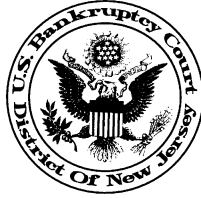


UNITED STATES BANKRUPTCY COURT
District of New Jersey



REQUEST TO REVIEW FILE

This form must be completed in full before a file may be accessed

Do not tamper with file fastener or rearrange the contents of this file. Under 11 U.S.C. §2071, it is unlawful to remove, mutilate, obliterate or destroy this file or any part thereof and is punishable by up to a \$2,000 fine or three years in prison, or both.

Date: _____

Debtor's Name: _____

Case No.: _____

Adversary No.: _____

Your name: _____

Signature: _____

Company/Law Firm: _____

Telephone No.: _____

Please complete the attached outcard and present it, together with this request form, to the Bankruptcy Court employee on duty in the file room.

Deputy Clerk's initials:
